

	<div>EXHIBIT 10 A - BUDGET FORM</div> <div>SB 82 CRISIS RESIDENTIAL TREATMENT PROGRAM</div> <div>ANNUALIZED BUDGET</div> <div>SUBMISSION DATE: _____</div> <div>PROPOSER NAME: _____</div> <div>SERVICE AREA: _____</div> <div>SUPERVISORIAL DISTRICT: _____</div> <table><tr><td>a</td><td>b</td><td>c</td></tr><tr><td>BUDGET CATEGORIES</td><td colspan="2">PROPOSED BUDGET</td></tr></table>			a	b	c	BUDGET CATEGORIES	PROPOSED BUDGET	
a	b	c							
BUDGET CATEGORIES	PROPOSED BUDGET								
A.	PERSONNEL (SALARIES & EMPLOYEE BENEFITS)	FTE	AMOUNT						
	Clinical Staff by License/Degree								
	Program Director								
	Physician (MD)/Psychiatrist/MH Nurse Practitioner (NP)								
	Psychologist/MSW/LCSW/MFT (Lic./Reg./Waiv'd.)/MH Clinical Nurse Specialist (CSN)								
	RN, LVN, Psych. Tech.								
	MH Rehabilitation Specialist								
	Mental Health Related B.A. or 2 yrs. MH Experience - not licensed								
	No B.A. or 2 yrs Exp & Student								
	Administrative and Program Support Staff(List Position Title)								
	Total Salaries and Wages		-						
	Employee Benefits								
	TOTAL PERSONNEL EXPENSE & FTEs	-	-						
B.	PROGRAM SERVICES AND SUPPLIES:								
	CHFFA Start-up Expenses (not to exceed two months)								
	Office/Program Supplies								
	Mileage								
	TOTAL PROGRAM SERVICES AND SUPPLIES		-						
C.	CAPITAL DEVELOPMENT EXPENSES								
	Acquisition of Property, Construction, Renovations (CHFFA FUNDING)								
	Furnishing and Equipment (CHFFA FUNDING)								
	Information Technology (not to exceed 1% of CHFFA Funding)								
	TOTAL CAPITAL DEVELOPMENT		-						
D.	INDIRECT ADMINISTRATIVE OVERHEAD								
	INDIRECT ADMINISTRATIVE OVERHEAD (excludes CHFFA Funding)								
	TOTAL COSTS		-						

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E.	REVENUE SOURCES		
	a	b	c
	CHFFA FUNDING (only funds Capital Development and One-time Start-up, not to exceed \$1,00,000)		
	MHSA Non -EPSDT Indigent		
	MHSA Non-EPSDT Federal Match		
	MHSA Non-EPSDT Federal Financial Participation (FFP) Medi-Cal		
	MHSA EPSDT Federal Match		
	MHSA EPSDT FFP Medi-Cal		
	Medicaid Expansion		
	Other		
	TOTAL REVENUE		-
	REQUESTED DAILY RATE		